

HARRISONVILLE TELEPHONE COMPANY

213 S. Main St. • P.O. Box 149
Waterloo, IL 62298-0149

Received & Inspected

JUL 02 2015

618-939-9252
Fax 618-939-3399
htclhw@htc.net

LEE H. WHITCHER
VICE PRESIDENT OF REGULATORY COMPLIANCE

FCC Mail Room

June 29, 2015

Marlene H. Dortch, Secretary
Federal Communications Commission
Office of the Secretary
445 12th Street, S.W.
Washington, D.C. 20554

CONFIDENTIAL FINANCIAL INFORMATION –
SUBJECT TO PROTECTIVE ORDER IN WC
DOCKET NOS. 10-90, 07-135, 05-337, 03-
109, 14-58, CC DOCKET NOS. 01-92, 96-45,
GN DOCKET NO. 09-51, WT DOCKET NO. 10-
208, BEFORE THE FEDERAL
COMMUNICATIONS COMMISSION.

RE: WC Docket No. 14-58
Annual Report Pursuant to 47 C.F.R. §§ 54.313 and 54.422

Dear Ms. Dortch:

Harrisonville Telephone Company hereby files its FCC Form 481 - Carrier Annual Reporting Data Collection Form in compliance with 47 C.F.R. §§ 54.313 and Section 54.422. The FCC Form 481 has been completed, certified, and submitted to the Universal Service Administrative Company.

Pursuant to the Protective Order released June 17, 2015 (FCC Record DA 15-712), and in accordance with the Commission's confidentiality rules, we are filing a redacted version of the financial information required by §54.313(f)(2). This information is competitively sensitive and is not normally released to the public. In addition, attached is a letter requesting confidential treatment under §§0.457 and 0.459 of the §54.313(a)(1) 2015 Progress Report on Service Quality Improvement Plan. Accordingly, we are enclosing one Stamped Confidential Form 481 document and two copies of the Redacted Confidential Form 481 document.

As directed by Commission staff, 2 copies of the Stamped Confidential Form 481 document will be delivered to Charles Tyler, Telecommunications Access Policy Division, Wireline Competition Bureau, Federal Communications Commission. A copy of the FCC Form 481 is also being submitted to the Illinois Commerce Commission pursuant to §§ 54.313(i) and 54.422(c).

Please contact me if you have any questions.

Yours truly,

Lee H. Whitcher

Enc.

No. of Copies rec'd
List ABCDE

0+1

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Marlene H. Dortch, Secretary
Federal Communications Commission
Office of the Secretary
445 12th Street, S.W.
Washington, D.C. 20554

RE: WC Docket No. 14-58
2015 ETC Annual Report of Harrisonville Telephone Company
Request for Confidentiality

Dear Ms. Dortch:

Harrisonville Telephone Company (the "Company") hereby requests, pursuant to Sections 0.457 and 0.459 of the Commission's rules, withholding from public inspection certain information contained in an attachment to the above referenced reporting requirement. The Company provides the following in support of its request, numbered consistent with the subparagraphs of Section 0.459(b).

1. The information for which the Company is seeking confidential treatment is an attachment to the Company's annual reporting information pursuant to Sections 54.313 and 54.422 of the Commission's rules ("Report").
2. Rate-of-Return Eligible Telecommunications Carriers ("ETCs") must file with the Commission a section 54.313(a)(1) 2015 Progress Report on Service Quality Improvement Plan ("Progress Report") which is contained in the attachment to the 2015 Report.
3. The information contained in the attachment for which the Company seeks the withholding from public inspection is the detailed description of information pertaining to the Company's Progress Report provided at FCC Form 481 as the Line 112 attachment. Information of this nature is confidential commercial information routinely withheld from public inspection.
4. With respect to identifying the degree to which the subject attachment concerns a service that is subject to competition, the information is of a financial and competitive nature regarding the provision of telecommunications services. The Line 112 attachment contains competitively sensitive financial and technical

information related to improvements or upgrades and maintenance to the Company's network, as well as specific capabilities of the Company's network.

This Progress Report details services provided by the Company over its existing network and planned network improvement and maintenance for 2015 including improvements and upgrades at the wire center level and projected capital costs associated with the improvements and upgrades and operating costs associated with maintaining the network. As such, this information contains competitively sensitive information related to the Company's existing network as well as detailed plans at the wire center level for network upgrades and maintenance projected for 2015.

5. With respect to identifying possible exposure to competitive harm, the information contained in the Line 112 attachment is information that is not customarily released to the public. This information is proprietary to the Company, is unique to the Company's serving territory and is only known to the Company and its authorized agents. If the Information is not protected, it would have economic value to potential competitors who would be able to target their marketing to specific customers. In a competitive telecommunications marketplace, this type of information is highly sensitive. If publicly disclosed, it would enable competitors to craft business plans that capitalize on their knowledge of the locations of the Company's customers which would place the Company at a competitive disadvantage.
6. With respect to steps the Company has taken to ensure against unauthorized disclosure of the information contained in the attachment, the Company is filing the attachment under seal. The Company uses the information contained in the Progress Report to ensure that its customers continue to receive state-of-the-art high quality telecommunications and broadband services that the Company has been providing to them for many years as well as to satisfy mandatory reporting requirements and does not share the information for which protection is sought. The Company protects the secrecy of this information with a security protocol that ensures the information is not inadvertently disclosed or disseminated. Only Company personnel with a direct need to know are authorized to access the information.
7. Any previous versions of this information are not publicly available.
8. Because the information is not routinely available, a need exists for maintaining the confidentiality of this information permanently.
9. Not applicable.

Based on the preceding, the Company respectfully requests that the Commission grant confidential treatment under Section 0.459 to Company's Progress Report provided at

FCC Form 481 as the Line 112 attachment. Please contact me with any questions regarding this request.

Yours truly,

A handwritten signature in cursive script, appearing to read "T. H. White". The signature is written in dark ink on a white background.

FCC Form 481 - Carrier Annual Reporting
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2011

<010>	Study Area Code	341026
<015>	Study Area Name	HARRISONVILLE TEL CO
<020>	Program Year	2016
<030>	Contact Name: Person USAC should contact with questions about this data	Lee H. Whitcher
<035>	Contact Telephone Number: Number of the person identified in data line <030>	6189399252 ext.
<039>	Contact Email Address: Email of the person identified in data line <030>	htclhw@htc.net

ANNUAL REPORTING FOR ALL CARRIERS	54.313 Completion Required	54.422 Completion Required
	(check box when complete)	

<100>	Service Quality Improvement Reporting	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<200>	Outage Reporting (voice)	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<210>	<input checked="" type="checkbox"/> -- check box if no outages to report		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<300>	Unfulfilled Service Requests (voice)	0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<310>	Detail on Attempts (voice)	(attach descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<320>	Unfulfilled Service Requests (broadband)	3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<330>	Detail on Attempts (broadband)	34102611330.pdf (attach descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<400>	Number of Complaints per 1,000 customers (voice)		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<410>	Fixed	0.0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<420>	Mobile	0.0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<430>	Number of Complaints per 1,000 customers (broadband)		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<440>	Fixed	0.0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<450>	Mobile	0.0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<500>	Service Quality Standards & Consumer Protection Rules Compliance	(check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<510>	34102611510.pdf (attached descriptive document)		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<600>	Functionality in Emergency Situations	(check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<610>	34102611610.pdf (attached descriptive document)		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<700>	Company Price Offerings (voice)	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<710>	Company Price Offerings (broadband)	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<800>	Operating Companies and Affiliates	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<900>	Tribal Land Offerings (Y/N)?	(if yes, complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1000>	Voice Services Rate Comparability Certification	Yes	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1010>	341026111010.pdf (attach descriptive document)		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1100>	Certify whether terrestrial backhaul options exist (Yes or No)	(if not, check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1110>		(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1200>	Terms and Condition for Lifeline Customers	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Price Cap Carriers, Proceed to Price Cap Additional Documentation Worksheet

<2000>	Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers	(check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<2005>		(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<3000>	Rate of Return Carriers, Proceed to ROR Additional Documentation Worksheet	(check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<3005>		(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

**(100) Service Quality Improvement Reporting
Data Collection Form**

 FCC Form 481
 OMB Control No. 3060-0986/OMB Control No. 3060-0819
 July 2013

<010>	Study Area Code	341026
<015>	Study Area Name	HARRISONVILLE TEL CO
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Lee H. Whitcher
<035>	Contact Telephone Number - Number of person identified in data line <030>	6189399252 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	htclhw@htc.net
<110>	Has your company received its ETC certification from the FCC?	(yes / no) <input checked="" type="radio"/> <input type="radio"/>
	If your answer to Line <110> is yes, do you have an existing §54.202(a) "5	
<111>	year plan" filed with the FCC?	(yes / no) <input checked="" type="radio"/> <input type="radio"/>

If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.

- <112> Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your company is a CETC which only receives frozen support, your progress report is only required to address voice telephony service.

34102611112.pdf

Name of Attached Document

Please select the appropriate responses below (Yes, No, Not Applicable) to confirm that the attached document(s), on line 112, contains a progress report on its five-year service quality improvement plan pursuant to §54.202(a). The information shall be submitted at the wire center level or census block as appropriate.

- <113> Maps detailing progress towards meeting plan targets
- <114> Report how much universal service (USF) support was received
- <115> How much (USF) was used to improve service quality and how support was used to improve service quality
- <116> How much (USF) was used to improve service coverage and how support was used to improve service coverage
- <117> How much (USF) was used to improve service capacity and how support was used to improve service capacity
- <118> Provide an explanation of network improvement targets not met in the prior calendar year.

Yes
Yes
Yes
Yes
Yes
Yes

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<039> Contact Email Address - Email Address of person identified in data line <030> htc1hw@htc.net

[illegible]

(700) Price Offerings including Voice Rate Data
Data Collection Form

ECG Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2015

<010>	Study Area Code	341026
<015>	Study Area Name	HARRISONVILLE TEL CO
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Lee H. Whitcher
<035>	Contact Telephone Number - Number of person identified in data line <030>	6189399252 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	htclhw@htc.net

<701>	Residential Local Service Charge Effective Date	1/1/2015
<702>	Single State-wide Residential Local Service Charge	1.0

[illegible]

(710) Broadband Price Offerings
 Data Collection Form

FCC Form 481
 OMB Control No. 3060-0986 / OMB Control No. 3060-0819
 July 2013

<010>	Study Area Code	341026
<015>	Study Area Name	HARRISONVILLE TEL CO
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Lee H. Whitcer
<035>	Contact Telephone Number - Number of person identified in data line <030>	6189399252 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	htclhw@htc.net

[illegible]

(800) Operating Companies
Data Collection Form
EEO Form 481
OMB Control No. 3060-0985/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	341026
<015>	Study Area Name	HARRISONVILLE TEL CO
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Lee H. Whitcher
<035>	Contact Telephone Number - Number of person identified in data line <030>	6189399252 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	htclhw@htc.net
<810>	Reporting Carrier	Harrisonville Telephone Company
<811>	Holding Company	HTC Holding Co.
<812>	Operating Company	Harrisonville Telephone Company

[illegible]

(900) Tribal Lands Reporting
Data Collection Form

EOC Form 481

OMB Control No. 3060-0936/OMB Control No. 3060-0819

July 2013

<010> Study Area Code 341026
 <015> Study Area Name HARRISONVILLE TEL CO
 <020> Program Year 2016
 <030> Contact Name - Person USAC should contact regarding this data Lee H. Whitcher
 <035> Contact Telephone Number - Number of person identified in data line <030> 6189399252 ext.
 <039> Contact Email Address - Email Address of person identified in data line <030> htclhw@htc.net

<910> Tribal Land(s) on which ETC Serves

<920> Tribal Government Engagement Obligation

Name of Attached Document

If your company serves Tribal lands, please select (Yes, No, NA) for each these boxes to confirm the status described on the attached document(s), on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:

- <921> Needs assessment and deployment planning with a focus on Tribal community anchor institutions.
 <922> Feasibility and sustainability planning;
 <923> Marketing services in a culturally sensitive manner;
 <924> Compliance with Rights of way processes
 <925> Compliance with Land Use permitting requirements
 <926> Compliance with Facilities Siting rules
 <927> Compliance with Environmental Review processes
 <928> Compliance with Cultural Preservation review processes
 <929> Compliance with Tribal Business and Licensing requirements.

Select Yes or No or Not Applicable

(1100) No Terrestrial Backhaul Reporting
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	341026
<015>	Study Area Name	HARRISONVILLE TEL CO
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Lee H. Whitcer
<035>	Contact Telephone Number - Number of person identified in data line <030>	6189399252 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	htclhw@htc.net

<1120> Please confirm whether terrestrial backhaul options exist within the supported area pursuant to § 54.313(g) (Yes, No).

<1130> Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(g).

(1200) Terms and Condition for Lifeline Customers		FCC Form 481
Lifeline		OMB Control No. 3060-0986/OMB Control No. 3060-0819
Data Collection Form		July 2013

<010>	Study Area Code	341026
<015>	Study Area Name	HARRISONVILLE TEL CO
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Lee H. Witcher
<035>	Contact Telephone Number - Number of person identified in data line <030>	6189399252 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	htclhw@htc.net

<1210> Terms & Conditions of Voice Telephony Lifeline Plans

341026111210.pdf

Name of Attached Document

<1220> Link to Public Website

HTTP www.htc.net

"Please check these boxes below to confirm that the attached document(s), on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:

- <1221> Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers, ☒
- <1222> Details on the number of minutes provided as part of the plan, ☒
- <1223> Additional charges for toll calls, and rates for each such plan. ☒

(2000) Price Cap Carrier Additional Documentation

Data Collection Form

Including Rate of Return Carriers affiliated with Price Cap Local Exchange Carriers

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	341026
<015>	Study Area Name	HARRISONVILLE TEL CO
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Lee H. Whitener
<035>	Contact Telephone Number - Number of person identified in data line <030>	6189399252 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	lee@hwhc.net

Select the appropriate responses below (Yes, No, Not Applicable) to note compliance as a recipient of Incremental Connect America Phase I support, frozen High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e). The information reported on this form and in the documents attached below is accurate.

Incremental Connect America Phase I reporting

- <2010> 2nd Year Certification (47 CFR § 54.313(b)(1)i)
 <2011a> 3rd Year Certification (47 CFR § 54.313(b)(1)ii)
 <2011b> Attachment (47 CFR § 54.313(b)(1)iii)

Name of Attached Document(s) Listing Required Information

Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(a))

- <2012> 2013 Frozen Support Calculation (47 CFR § 54.313(c)(1))
 <2013> 2014 Frozen Support Calculation (47 CFR § 54.313(c)(2))
 <2014> 2015 Frozen Support Calculation (47 CFR § 54.313(c)(3))
 <2015> 2016 and future Frozen Support Calculation (47 CFR § 54.313(c)(4))

Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d))

- <2016> Certification Support Used to Build Broadband

--

Connect America Phase II Reporting (47 CFR § 54.313(e))

- <2017> 3rd year Broadband Service Certification
 <2018> 5th year Broadband Service Certification
 <2019> Interim Progress Certification
 <2020> Please check the box to confirm that the attached document(s), on line 2021, contains the required information pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.

- <2021> Interim Progress Community Anchor Institutions

Name of Attached Document(s) Listing Required Information

(300) Rate Of Return Certificate Additional Documentation (Continued)	
Rate Of Return	10.00%
Rate Of Return Basis	100%
Rate Of Return Period	10/1/2015

<010>	Study Area Code	341026
<015>	Study Area Name	HARRISONVILLE TEL CO
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Lee H. Whitchee
<035>	Contact Telephone Number - Number of person identified in data line <030>	6189399252 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	htclhw@htc.net

Financial Data Summary

(3027) Revenue

(3028) Operating Expenses

(3029) Net Income

(3030) Telephone Plant In Service(TPIS)

(3031) Total Assets

(3032) Total Debt

(3033) Total Equity

(3034) Dividends

Certification - Reporting Carrier Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010> Study Area Code	341026
<015> Study Area Name	HARRISONVILLE TEL CO
<020> Program Year	2016
<030> Contact Name - Person USAC should contact regarding this data	Lee H. Whitcher
<035> Contact Telephone Number - Number of person identified in data line <030>	6189399252 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	htclhw@htc.net

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients	
I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.	
Name of Reporting Carrier: HARRISONVILLE TEL CO	
Signature of Authorized Officer: CERTIFIED ONLINE	Date 06/29/2015
Printed name of Authorized Officer: Karen Bergman	
Title or position of Authorized Officer: Executive VP & Secretary-Treasurer	
Telephone number of Authorized Officer: 6189399226 ext.	
Study Area Code of Reporting Carrier: 341026	Filing Due Date for this form: 07/01/2015
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

Certification Agent/Carrier Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
--	--

<010> Study Area Code	341026
<015> Study Area Name	HARRISONVILLE TEL CO
<020> Program Year	2016
<030> Contact Name - Person USAC should contact regarding this data	Lee H. Whitcher
<035> Contact Telephone Number - Number of person identified in data line <030>	6189399252 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	htclhw@htc.net

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I certify that (Name of Agent) _____ is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.	
Name of Authorized Agent: _____	
Name of Reporting Carrier: _____	
Signature of Authorized Officer: _____	Date: _____
Printed name of Authorized Officer: _____	
Title or position of Authorized Officer: _____	
Telephone number of Authorized Officer: _____	
Study Area Code of Reporting Carrier: _____	Filing Due Date for this form: _____
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.	
Name of Reporting Carrier: _____	
Name of Authorized Agent or Employee of Agent: _____	
Signature of Authorized Agent or Employee of Agent: _____	Date: _____
Printed name of Authorized Agent or Employee of Agent: _____	
Title or position of Authorized Agent or Employee of Agent: _____	
Telephone number of Authorized Agent or Employee of Agent: _____	
Study Area Code of Reporting Carrier: _____	Filing Due Date for this form: _____
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

Attachments

<701>	Residential Local Service Charge Effective Date	1/1/2015
<702>	Single State-wide Residential Local Service Charge	1.0

[illegible]

(210) Broadband Price Offerings
Data Collection Form

page font: 18

GMB Control No. 3060-0986 GMB Control No. 3060-0819

July 2013

<010>	Study Area Code	341026
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<015>	Study Area Name	HARRISONVILLE TEL CO
-------	-----------------	----------------------

<020>	Program Year	2016
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<030>	Contact Name - Person USAC should contact regarding this data	Lee H. Whitcher
-------	---	-----------------

<035>	Contact Telephone Number - Number of person identified in data line <030>	6189399252 ext.
-------	---	-----------------

<039>	Contact Email Address - Email Address of person identified in data line <030>	htclhw@htc.net
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<711>

[illegible]

**Harrisonville Telephone Company (“the Company”)
2015 PROGRESS REPORT
ON SERVICE QUALITY IMPROVEMENT PLAN**

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

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[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

1000

[REDACTED]

1. *Chlorophyll a* and *Chlorophyll b* were determined by the method of Arar and Collins (1997) using a spectrophotometer (Shimadzu UV-1601U).